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Approved for use through 07/31/2006. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004

Ef Fees pursuant to the Con	Complete if Known							
FEE TR				Application N	lumber	10/01	8,387	(2)
			AL	Filing Date			5, 2002	JUN 0 3 2005 🕿
tor	FY 200)5		First Named		John	Gordon Rush	breoke §
Applicant claims s	Examiner Na	me	Layla	G. Lauchma				
TOTAL AMOUNT		(\$)	\$400.00	Art Unit Attorney Doc	ket No	92060)2-906672	TRADENAR
72007								
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Deposit Account Number: 12-0913 Deposit Account Name: Barnes & Thornburg								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
⊠ Cha	Charge any additional fee(s) or any underpayment of							
fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
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FEE CALCULATION								
1. BASIC FILING, SE	ARCH, AND EX: FILING F			CH FEES	_	V A B A I B	IATION FEE	
	1 12.110 1	Small Entity		Small Entity		XAMIN	IATION FEES Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	-	ee (\$)	Fee (\$)	Fees Paid(\$)
Utility	300	150	500	250	:	200	100	
Design	200	100	100	50		130	65	
Plant	200	100	300	150		160	80	
Reissue	300	150	500	250	6	500	300	
Provisional	200	100	0	0		0	0	
2. EXCESS CLAIM F	EES							S
Fee Description							Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (ir	ncluding Reissue	s)					50	25
Each independent claim over 3 (including Reissues)							200	100
Multiple dependent cla				360	180			
Total Claims	Extra Claims	<u>s Fee (</u> \$	١	Foo Paid (\$)				Dependent Claims
	P= <u>0</u>			Fee Paid (\$) \$0.00			Fee (\$)	Fee Paid (\$)
HP = highest number of to	tal claims paid for,	if greater than	20.		-			
Indep. Claims	Extra Claims		1	Fee Paid (\$)		-		
	0 = <u>2</u>	_ X	<u>\$200.00</u> =	\$400.00				
HP = highest number of in. 3. APPLICATION SIZ	dependent claims p E FFF	paid for, if grea	iter than 3.					
If the specification and	drawings excee	d 100 sheets	s of paper (e	xcluding electr	onically fi	ed sec	uence or con	nouter listing under
37 CFR 1.52(e)), the a See 35 U.S.C. 41(a)(1)	udiication size ie	e que is aza	60 (\$125 for	small entity) fo	r each ad	ditiona	50 sheets or	fraction thereof.
Total Sheets	Extra Shee		Number of ea	ch additional 50	or fractio	n there-	of Eac."	¢)
10		/ 50	0	(round up			of <u>Fee (</u> × <u>\$250.0</u>	
4. OTHER FEE(S)				-			₩₩₩	Fee Paid (\$)
Non-English specificati Other (e.g., late filing s	on, \$130 fee (urcharge):	no small ent	tity discount))				***************************************
SUBMITTED BY		7.						
Signature	بالد لما	on 1111.		egistration No.	26,93	35	Telephone	312-214-4800
Name (Print/Type)		Willi	am M. Lee,			·	Date	June 1, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



920602-906672

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE THE APPLICATION OF) Examiner: Layla G. Lauchman
John Gordon Rushbrooke)
SERIAL NO. 10/018,387) Group Art Unit No. 2877
FILED: June 5, 2002) Customer Number: 23644)
FOR: Microplate Reader)
	,)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450," on June ______, 2005.

Name of person signing: Minnie Wilson

Signature Menine Wilson

RESPONSE TO FINAL OFFICE ACTION DATED APRIL 1, 2005

Honorable Director of Patents and Trademarks P. O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the final Office Action dated April 1, 2005, it is requested that the application be amended as follows: